PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2) **FOR** NUMBER FILED **NUMBER EXTRA BASIC FEE TOTAL CLAIMS** minus 20= INDEPENDENT CLAIMS minus 3 = **MULTIPLE DEPENDENT CLAIM PRESENT**

* If the difference in column 1 is less than zero, enter "0" in column 2

\mathbf{o}	A 1140	40		NDED	DADTI
LL	AIMS	A5	AME	NUEU	- PART II

		(Column 1)		(Column 2)	(Column 3)			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			
	Total	.27	Minus	20	=7			
	Independent	. 13	Minus	3	= /0			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
ΣQΨ	Total	*	Minus	**	=
ME	Independent	*	Minus	***	=
۷	FIRST PRESE	PENDENT CLAIM			

		(Column 1)	gwa.	(Column 2)	(Column 3)		
) 		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total	*	Minus	**	=		
	Independent	*	Minus	***	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

	SMALL I	ENTITY	OR	OTHER SMALL	
	RATE	FEE		RATE	FEE
		345.00	OR		690.00
	X\$ 9=		OR	X\$18=	126.
	X39=		OR	X78=	780-
	+130=		OR	+260=	
•	TOTAL		OR	TOTAL	1596.
	•		OTHER	THAN	

SMALL ENTITY

OIIIAEE (О П.	OWALL I	-141111
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	7x\$18=	126.00
X39=		OR	<i>∕0</i> X78=	180,00
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	15/60

SMALL ENTITY

		4.0		Annual Control
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL		OR	TOTAL	

		-		
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	_
+130=	,	OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

FORM PTO-875

(Rev. 12/99)

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09.479548

Total Fee Calculation

		lotal Fee	Calcula	ition			
	Fee Code	Total # Claims	Number Extra	X	Fcc	Fec :	- Total
r	Sm./Lg.				Sm. Entity	Lg. Entiry	
Basic Filing Fee	201/101					1090-	. lo96.
Total Claims >20	203/103	27 -20 -	7	Х		18.	-1260.
Independent Claims >3	202/102	13	10	X		78.	780.
Mult. Dep Claim Present	204/104					=	
Surcharge	205/105				17	130	130.
English Translation	139						
TOTAL FEE CALCULA	ATION						1726.
Fees due upon filing t	he application:						
Total Filing Fees Due	= \$	1726	<u> </u>	_			
Less Filing Fees Subm	iiπed - \$		>	_			
BALANCE DUE	= \$	1726	0.	_			
Office of Initial Patent	Examination						

Figure 7